10/642819

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

LOBUZ 8(9

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			90		Joola			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			Ominus 20=		· 10			X\$ 9=		OR	X\$18=	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
INDEPENDENT CLAIMS			minus 3 =		. 0			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=	III.	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	775	OR	TOTAL	
CLAIMS AS AMENDED - PART II 9-26-0 (Column 1) (Column 2) (Column 3)							_	SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		FIIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• //	Minus	*2	0	= ·		X\$ 9=		OR	X\$18=	
	Independent	+ 3 NTATION OF M	Minus	AAA ENDEND	3	<u> -                                    </u>		X42=		OR	X84=	
<u> </u>	rino i Prese	NIAHON OF M	OLNIFLE DEF	ENDEN	CLAIN		1	+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												1
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	GA4	CL AIM	<u> -                                    </u>	4 [	X42=		OR	X84=	
<u> </u>	ringi rhese	SALVIOLA OF IN	OLITCE DEF	ENDEN	CLAIM		ا ل	+140=		OR	+280=	
	TOTAL										TOTAL	
ADDIT. FEE OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	***	T CL AIM	-	4	X42=		OR	X84=	٠.
┞	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The *Highest Nur	nber Previously Pr	aid For" (Total o	r Independ	dent) is th	e highest numb	er fou	ınd in the apı	propriate bo	x in co	olumn 1.	